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Complete if Known Substitute for form 1449/PTO Application Number 10/598,412 Filing Date August 28, 2006 INFORMATION DISCLOSURE First Named Inventor Peter RADZISZEWSKI STATEMENT BY APPLICANT Art Unit <del>3735 2</del>856 (Use as many sheets as necessary) Examiner Name Gunnar Gissel Attorney Docket Number 771/11168.293

Sheet 1

U. S. PATENT DOCUMENTS									
Examiner Initials*	Cite No.1	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant				
	Number-Kind Code <sup>2 (if known)</sup>			Figures Appear					
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Initials*	No.¹	Country Code <sup>3 -</sup> Number <sup>4 -</sup> Kind Code <sup>5</sup> ( <i>if known</i> )	Date MM-DD-YYYY	Applicant of Cited Document	Where Relevant Passages Or Relevant Figures Appear	Т
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Examiner Signature	/Gunnar Gissel/	Date Considered	05/05/2008
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